24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Priorities USA Action	C C00495861
Check if 24-hour report X 48-hour report New report Amends report filed	I on Mam / Dad / Yayayay
Full Name of Payee Ralston Lapp Media, LLC	Date of Public Distribution/Dissemination
	06 19 2016
Mailing Address 1054 31st St NW	Amount
Ste 430 City State Zip Code	28374.81
Washington DC 20007-6042	Transaction ID : VNTYH9T1S89 Date of Disbursement or Obligation
Purpose of Expenditure Video Production (Estimate) Category/ Type	06 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District: 00
DONALD J TRUMP Oppose	President Senate State: 00
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary ⊠ General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	
State Lip Gods	
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Type	
Name of Federal Candidate Support Offic	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General
Per Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	28374.81
(a) SSE IS NEED IN INCIDENT IN	20374.01
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	28374.81
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
	06 21 2016
Signature	